

Libby Community Advisory Group

Meeting Summary

October 12, 2000

Introductions

Gerald Mueller and Libby Community Advisory Group (CAG) members present introduced themselves. A list of the members in attendance is attached below as Appendix 1.

Agenda

Mr. Mueller reviewed an agenda for this meeting including the following topics:

- St. John's Lutheran Hospital Grant Request
- CAG Letters
- EPA Report
- ATSDR Report
- County Report
- Health Network America Presentation
- Public Comment

St. John's Lutheran Hospital Report

Medical Trust

Rick Palagi reported that the Intermountain Administrators have been retained to help establish the medical trust.

Grant Request

Laura Sedler, the Asbestos Group Facilitator, reported on and asked for the CAG's support for a Rural Health Outreach Grant proposal being submitted to the federal Health Resources and Services Administration. Ms. Sedler had previously supplied an abstract of the grant proposal that had been mailed to CAG members with the September 28 meeting summary.

The grant would provide for continuing funding for the Libby Community Center for Asbestos Related Diseases administered jointly by the Lincoln County Health Board, the Western Montana Mental Health Center, and St. John's Hospital. Current funding provided from private sources runs out in February 2001. If the grant is approved, the Center would be staffed by a doctor and nurse with expertise in asbestos-related disease and a mental health clinician from the Montana State Community Mental Health Services center. The doctor and nurse would conduct on-going assessments, coordinate each patient's medical resources, administer immunizations, monitor new treatment therapies, and provide patient education and guidance in disease management and lifestyle modification. The mental health clinician would conduct screening to identify patient need for and access to adjunctive mental health services and would be available for initial counseling to support a healthy adjustment process. The center would also operate ongoing peer support groups, facilitated by mental health and social services professionals. The support groups will serve to identify and relieve sources of chronic stress, address issues of grief and loss, initiate and support behavior modification efforts, and establish a forum for peer teaching about living with asbestos related disease.

**** CAG Action - The CAG voted unanimously to support a seconded motion to support the grant request as described by Ms. Sedler. Individual CAG members then signed a letter of support for***

the grant.

CAG Letters

Gerald Mueller reported that as directed by the CAG at its September 28, 2000 meeting, he wrote letters to Senators Baucus and Burns requesting federal funds immediately for Libby people who need financial support to obtain treatment for asbestos-related disease. Mr. Mueller, again at the CAG's direction, wrote to the Lincoln County Health Board to encourage it to do all within its powers to secure necessary medical and environmental monitoring, screening, and treatment programs with all deliberate speed. Copies of the letters to the Senators and the Board of Health were provided to CAG members with the September 28, 2000 CAG meeting summary. Finally, Mr. Mueller reported that he sent letters to Governor Racicot and Representative Paul Clark requesting their assistance in obtaining access for EPA from W.R. Grace to the mine and Kootenai Development Corporation (KDC) properties for disposal of asbestos contaminated waste and cleanup.

The CAG received a response from Representative Aubyn Curtis to its letter regarding EPA access to the mine and KDC properties. Rep. Curtis indicated a willingness to write to W.R. Grace as requested by the CAG and asked for a name and address of a W.R. Grace official. Mr. Mueller replied and suggested that Rep. Curtis write to Alan Stringer.

EPA Report

Paul Peronard reported behalf of EPA reported on the following subjects.

EPA Contractor Failure

An EPA contractor, ISSI, recently went out of business. ISSI had been responsible for toxological support, conducting the risk assessment, maintaining the clean-up data base, and community support. Payment of some subcontractors will be delayed as a result, including the Libby VFW chapter for the use of its facility for the recent Libby asbestos conference. Letters containing the results of the July and August air sampling will be also be delayed until EPA can hire a new contractor and resume work on the data base.

Mine and KDC Property Access

No hearing date has been set yet regarding EPA's suit against W.R. Grace to obtain access to the mine and KDC properties. EPA hopes a date will be set next week. Briefs and motions have been filed.

Cleanups

Excavation work has been completed at the screening plant, and preliminary restoration work has begun. The site will be buttoned up for winter by the first week in November. The clean-up crew has been reduced from 22 to 11. If the court does not grant EPA access by October 18, the KDC properties will remain untouched through the winter. About five to six weeks of work are necessary at these properties. Concerning the export plant site, Millwork West has been moved and is opened for business at the Highway 2 site. W.R. Grace is almost finished cleaning the third building. Cleaning the dirt under the building floor is underway. Debris on the west side of the export site has been moved to the mine. Excavation of contaminated soil will begin on October 16. Additional air sampling will be conducted to ensure that the excavation does not result in asbestos moving through the air off of the site. Excavation should be completed by the end of November or the first part of December.

Air Monitoring

At the export plant, one monitoring sample taken at the work area perimeter detected one asbestos fiber and a resulting concentration of 0.0025 fibers per cubic centimeter. EPA attributed this reading to the cleanup and increased dust suppression. At the screening plant, fibers were detected on the Highway 37 side of the property, probably from Rainy Creek Road.

Tunis Letter

At its September 14 meeting, the CAG voted to support Bob Tunis' letter to EPA requesting funding for a survey that would measure the impact of the current W.R. Grace situation on the economy of Libby and area and isolate these effects from other problems affecting the Libby community. EPA believes that the brown fields grant could be used for this purpose.

CAG Member Question - Will Libby be added to the Super Fund National Priority List (NPL)?

Answer - Work now underway is being conducted under the time critical removal action provisions for the federal Super Fund law. The risk assessment will clarify whether additional clean-up activity and adding Libby to the NPL is warranted.

CAG Member Question - How will the failure of ISSI affect the timing of completion of the risk assessment?

Answer - An ISSI subcontractor, Dr. Berman, and EPA's Chris Weiss are responsible for the risk assessment. Given ISSI's demise, the risk assessment will probably be broken into the following pieces:

- Update of the literature;
- Reconciliation of the literature with different types of asbestos;
- Construction of a new mathematical model to predict risk of diseases such as mesothelioma, lung cancer and asbestos;
- Peer review of the mathematical model; and
- Application of the model to Libby.

Peer review should begin in January or February.

CAG Member Question - How much material is being removed from the Rain Tree Nursery site?

Answer - We expect to remove about 60,000 to 70,000 cubic yards or about 100,000 tons of material. We expect about another 30,000 cubic yards from the KDC properties.

CAG Member Question - Has the railroad property on the west side of the ball park been sampled?

Answer - We have not sampled under the tracks and hope we it won't be necessary because of the disruption to rail service that would result. We have sampled along the railroad line across the river, and no fibers were detected. Vermiculite contaminated with asbestos was found on top of the bluff above the tracks.

Audience Question - Has EPA sampled the Rain Tree Nursery site for pesticides?

Answer - Yes. Results are due back tomorrow, October 13.

Audience Question - Has the liability concerns expressed by W.R. Grace been addressed?

Answer - Yes. This is the first time anyone has raised this issue at a Super Fund cleanup. EPA

and its contractors are insured. However, W.R. Grace will remain liable for the clean-up cost.

Audience Question - Will W.R. Grace grant access to EPA if no pesticide problem is found?

Answer - Alan Springer stated that the access question has been referred to the courts. EPA said that other disposal alternatives including adding a cell to the Lincoln County landfill and shipment to Spokane are being considered so that cleanup and disposal can proceed if access to the mine is not granted by the courts. The County has stated its willingness to consider use of its landfill if necessary.

ATSDR Report

Dan Strausbaugh reported on behalf of ATSDR, and addressed the following topics.

Medical Testing

The number of calls from people scheduling an appointment in advance of the October 20 deadline increased significantly this past week indicating the success of the newspaper, radio and television ads notifying people of the medical testing deadline. Next week, handbills will be posted around town advertising the October 20 deadline.

As of the week ending September 23, 4,696 people have been screened and the total appointments made was 5,908. An additional 68 appointments have been made for people living in Elko, Nevada.

CAG Member Comment - The ATSDR office will not be open on October 20, so people should call for their appointments by October 18.

Medical Testing Letters

The first batch of 140 to 150 letters reporting screening results were sent to physicians during the last week of September. Letters were mailed to participants during the week of Oct. 6th. A sample letter sent to participants who had normal results was passed out to CAG members. Patients with abnormal results would receive letters with a different second page containing one or more of the following statements:

- “You reported the following symptom(s) during your interview...”
- Chest X-Ray - One or more views found (condition identified by code number); and
- Pulmonary Function Test - The test response is reported by code number.

CAG Member Comment - People receiving the letters are confused about the status of their health and are seeking clarification from St. John’s Hospital, including interpretations of X-Rays. The Hospital is not funded to provide such clarifications.

CAG Member Comment - Each page of each letter should have an identifier to avoid having letters be mixed up.

CAG Member Question - Will the letters contain the X-Rays and pulmonary function test results?

Answer - Yes, the letters to the patient physicians will contain the complete package of X-Rays and other test results. Patients who don’t have personal physicians will have their test results sent to an ATSDR physician.

CAG Member Question - Will the letters be sent out chronologically based on appointment dates?

Answer - Yes. Letters will be sent out in batches corresponding to a week of screening appointments, about 500 at a time.

CAG Member Question - Is the contact telephone number the same for the people in Elko, Nevada?

Answer - Yes.

Preliminary Medical Testing Results

Sharon Campolucci is planning to attend the November 1 CAG meeting to present preliminary medical testing results such as the number of critical care referrals and the total number of people tested. This information will be presented via an overhead not a written report. These preliminary results will not differentiate between asbestos and non-asbestos related disease. It should also be remembered that the preliminary data may not be representative of the complete sample of all the screening results.

CAG Member Question - Will the preliminary results be published in the press or anywhere else?

Answer - No.

CAG Member Comment - It would be helpful to report the preliminary data by age and work-related or non-work related exposure.

CAG Member Comment - Data from ATSDR indicates that about 55% of a sample of just over a 1,000 people screened have no medical insurance.

CAG Member Comment - The question about having or not having health insurance was not asked everyone screened. The point at which the question began to be asked should be specified.

CAG Member Comment - The insurance information should be broken down by type of insurance including HMO or private insurance and by deductible amount to help understand the need for financial assistance for those needing medical treatment.

CAG Member Comment - Diana Hammer had her baby, and the CAG facilitator should send her a letter of congratulation.

County Report

Commissioner Rita Windom reported that the County is moving forward cautiously in considering the proposal to form the advisory and planning board.

Ron Anderson reported that in response to the CAG's recommendation, the Lincoln County Board of Commissioners is implementing a Vermiculite Insulation Registry Program that will be administered through the County Environmental Health Department. The purpose of the program is to develop a database inventory of structures that contain vermiculite insulation. Information entered into the Registry will provide detailed data on the location, size and condition of vermiculite insulated structures in Lincoln County. The program will be strictly voluntary, but anyone owning or occupying a vermiculite insulated structure is encouraged to participate. Questions concerning the program may be directed to the County Commissioners (293-7781 Extension 207); or to the Lincoln County Environmental Health Department (293-7781 Extension 228/FAX 293-5640).

Health Network America (HNA) Presentation

Using the handouts included in Appendix 2, Dr. Kardos, reported on HNA's administration of the W.R. Grace medical plan. Dr. Kardos stated that HNA is not an insurance company and only administers the plan. HNA does not profit based on the percentage of claims paid. HNA is also not the decision maker about the contents of the plan; W.R. Grace decides on plan content. Because the ATSDR medical screening program results will not be available to all those screened by the end of the year, HNA will recommend that W.R. Grace extend the grace period of coverage retroactivity beyond the end of the year.

CAG Member Question - Why is there an enrollment deadline?

Answer - There is no enrollment deadline. The grace period refers to retroactive coverage of medical bills for people who enroll in the plan. People who enroll before the end of the grace period will receive payment for their medical treatment back to January 21, 2000.

Dr. Kardos stated that the W.R. Grace plan is primary and the federal Medicare program is secondary because patient payments will be higher with Medicare secondary.

CAG Member Comment - We are working with Medicare to assure that having the W.R. Grace plan primary will not jeopardize Medicare payments. At this time we don't have this assurance from Medicare.

Dr. Kardos said that the W.R. Grace plan pays only for treatment needed for asbestos-related diseases. HNA is working on claims reporting with St. John's Hospital to ensure that asbestos-related treatment is compensated. Dr. Kardos and Rick Palagi are also working on a letter of agreement to address the fee schedule. The 90% reference in the reimbursement rate means that 90% of the doctors in either the HIAA or MDR survey would accept the reimbursement as total payment for the service rendered.

CAG Member Question - Are the 10% of the doctors that would not accepted the reimbursement as total payment best doctors?

Answer - Not necessarily. Highest cost does not necessarily mean the best service. Many other factors including competition affect what doctors charge.

Dr. Kardos reported that to date 45 people have requested W.R. Grace medical plan applications, 25 people have applied and all 25 have been accepted into the program. He urged people to enroll the plan.

CAG Member Comment - People have not enrolled in the plan because they don't trust W.R. Grace.

CAG Member Comment - People think the qualification criteria in the W.R. Grace plan are too strict, and therefore they don't sign up.

CAG Member Comment - St. John's Hospital has advocated that the plan include wellness provisions that in the long run will reduce treatment costs.

Response - The plan only pays for treatment of asbestos-related illness.

Audience Member Comment - The plan does not include mental health benefits.

CAG Member Comment - The plan prescription benefits are inadequate. Libby drug stores cannot afford to participate.

Response - HNA will discuss the prescription benefit provisions with W.R. Grace.

CAG Member Comment - Another reason people have not enrolled is that they have not received assurance that those who have filed suit against W.R. Grace will not somehow harm their legal position by enrolling.

Response - Medical records must be kept confidential by federal law.

Audience Member Comment - Back in April, the Sullivan law firm wrote to W.R. Grace lawyers asking that W.R. Grace give specific assurance that the legal position of those filing suits not be harmed by enrolling in the medical plan. No response has been received.

Answer - HNA will recommend to W.R. Grace that they respond to this letter and clarify that those filing suit will not be disadvantaged by enrolling in the medical plan.

CAG Member Comment - The home care and hospice provisions found on pages 15 -19 of the W.R. Grace plan are not adequate.

CAG Member Comment - The W.R. Grace plan could end at any time. We need up front money based on an actuarial analysis in a trust to assure that treatment will continue to be available.

Response - The frequency and intensity of asbestos-related disease in Libby is not known. An actuarial analysis will therefore not be accurate. The amount of funding in the trust would have to be updated at least every five years.

CAG Member Comment - Five areas of deficiencies in the W.R. Grace medical plan have been repeatedly communicated to W.R. Grace, but they have not been corrected. The deficiencies are a continuing source of frustration with the plan. The five areas are: plan eligibility criteria, home and hospice care, mental health coverage and wellness, screening and follow-up evaluation, and up front funding.

Response - Dr. Kardos stated that if people would send a detailed list of changes that should be made in the plan, HNA will submit them to a blue ribbon panel of three or four of the country's best asbestos physicians. These physicians will not be in the employ of W.R. Grace. The qualifications of the panelists will be sent to the CAG. HNA will take the recommendations from the panel for plan changes to W.R. Grace. Dr. Kardos will attempt to have a response to the list of problems back to the CAG at its December 14 meeting. Alan Stringer agreed that W.R. Grace will consider changes to the plan recommended by HNA as a result of this process.

CAG Member Comment - W.R. Grace should bring its excess insurance carrier into the discussion.

*** CAG Action - The CAG agreed unanimously that a detailed list of changes needed in the W.R. Grace plan should be sent to Dr. Kardos.**

CAG Member Comment - The data on insurance coverage from the medical screening, i.e. 55% lack medical insurance, demonstrate that people need financial assistance. People without insurance will not seek treatment for their asbestos-related diseases. While the W.R. Grace plan has deficiencies that should be corrected, anyone not getting medical care because they can't afford it should make use of the plan.

CAG Member Comment - W.R. Grace should continue to advertise the availability of the plan in simple terms that people can readily understand.

Next Meeting

The next meeting is scheduled for Wednesday, November 1, 2000 from 7 to 9:00 p.m. in the Ponderosa Room of the Libby City Hall.

Appendix 1

CAG Member Attendance List

October 12, 2000

Members	Group/Organization Represented
Clinton Maynard	Libby Resident
Dan Strausbaugh	Montana Representative of ATSDR
Leroy Thom	Former W.R. Grace Employee
Gayla Benefield	LCAVRO
Wendy Thomi	EPA Community Involvement
Jon Constan	Montana Department of Environmental Quality
Wilbur Wilson	County Council on Aging
David F. Latham	The Montanian
George Bauer	City of Libby
Bob Dedrich	Asbestos Victim
Brad Black	Lincoln County Health Officer
Paul Peronard	EPA On-Site Coordinator
Cyrus Lee	Kootenai Valley Head Start
Bob Tunis	Lincoln County Environmental Development Corp.
Kerry Beasley	St. Johns Lutheran Hospital Trustee
Rick Palagi	St. Johns Lutheran Hospital
Rita Windom	Lincoln County Commission
Sandy Wagner	Libby Resident
Ron Anderson	Lincoln County Environmental Health
Norita Skramstad	Asbestos Victim
Lloyd Doug Williamson	Tax Payer

Appendix 2

History

- Grace
- EPA
- Libby Medical Program
- CAG
- HNA

Health Network America 2000 2

Libby, Montana Health Network America

"A partnership opportunity to improve the health status of Libby citizens affected by asbestos"

Health Network America 2000 1

Libby Medical Program An ERISA Health Plan

- To provide former employees, their dependents, and residents of Libby who suffer from asbestos related conditions with medical care.
- Covered conditions are defined by the International Classification of Diseases (ICD-9).
- The plan benefit pays 100% of eligible medical expenses for covered conditions (no deductible, no co-insurance, no co-payment).
- Coverage is retroactive to Jan 21, 2000 if members enroll in the program before the end of 2000.
- Medicare is the secondary payer for expenses covered by the plan.

Health Network America 2000 3

Libby Medical Program

What defines an eligible medical expense?

- An eligible medical expense is created when a provider submits a charge for services covered under the plan.
- The charges are reviewed against national standardized reimbursement rates.
- The three most prevalent reimbursement rates in the United States are: Medicare, MDR, and HIAA

Libby Medical Program

How Reimbursement Rates Are Determined

- Medicare: RBRVS (Resource based relative value scale; Hsiao Study)
- HIAA: Health Insurance Association of America - actual charge data adjusted by relative value
- MDR: Medical Data Research - actual charge data adjusted by geographical indicators

Libby Medical Program

Comparison of Reimbursement Rates

Procedure (CPT) Code	Procedure Description	Libby Medical Program Reimbursement Rate is the higher of		Medicare Reimbursement Rate
		HIAA (90th%)	MDR (90th%)	
45330	Sigmoidoscopy	\$ 177.00	\$ 181.00	\$ 78.33
45378	Colonoscopy (sep procedure)	\$ 770.00	\$ 767.00	\$ 304.06
45380	Colonoscopy w/bx 1/mx	\$ 868.00	\$ 843.00	\$ 329.94
87060	Culture Bacterial; Throat/Nose	\$ 19.00	\$ 28.00	\$ 7.55
87086	Culture Bacterial Urin; Quan Colony	\$ 37.00	\$ 39.00	\$ 8.14
85014	Blood Count; other than spun hematocrit	\$ 13.00	\$ 16.00	\$ 2.62
85031	Blood Count; HG manual complete CBC	\$ 25.00	\$ 33.00	\$ 6.91
93501	Right Heart Cath	\$ 1,533.00	\$ 1,702.00	\$ 765.66
93536	Precut Insrt Intra- Aortic Balloon Cath	\$ 767.00	\$ 838.00	\$ 312.81
93015	CV Stress Test W/Treadmill	\$ 300.00	\$ 471.00	\$ 101.63
93307	Echo Trnsthorac real-time	\$ 365.00	\$ 478.00	\$ 188.47
93320	Doppler Echo Cont Wave W/Spectral	\$ 190.00	\$ 293.00	\$ 82.33
93325	Doppler Echo Color Flow Velocity Mapping	\$ 190.00	\$ 208.00	\$ 103.86
71020	Rad Exam Chest 2 views	\$ 96.00	\$ 89.00	\$ 31.85

Libby Medical Program

Impact of Reimbursement Rates

Provider of Service	Charge for Covered Condition Service	Libby Medical Program Eligible Medical Expenses	Difference
Alan Whitehouse, M.D.	\$ 48.41	\$ 48.41	-
Kalispell Regional Medical Center	\$ 170.45	\$ 170.45	-
Libby Clinic	\$ 716.90	\$ 695.90	\$ 21.00
Lincare, Inc.	\$ 4,320.58	\$ 4,320.58	-
Lincoln County Radiology	\$ 51.00	\$ 51.00	-
Northwest Imaging, PC	\$ 66.50	\$ 66.50	-
St. Johns Lutheran Hospital	\$ 1,645.82	\$ 1,307.17	\$ 338.65
Timothy Obermiller, M.D.	\$ 143.03	\$ 143.03	-
William Boehme, M.D.	\$ 141.36	\$ 141.36	-
Totals	\$ 7,304.05	\$ 6,944.40	\$ 359.65

Libby Medical Program

Today's Challenges

"To Maximize Existing Health Resources for the Citizens of Libby"

- **Relieve Fear of Unknown**
Extent of effects on population is not known
- **Make Health Care Available**

Develop consensus among town leadership about how to use available resources for medical expense relief
Maximize use of the unrestricted \$250,000 per year grant to St. Johns Hospital to support the health care needs of Libby Citizens

- **Provide Good Information**
Accurate, reasonable, and continuous infusion of medical information required for, citizens, medical leadership, and others
- **Long Term Management For Future Benefit**
Epidemiological study required (HNA)

Libby Medical Program

HNA Continued Efforts

- Further Explanation of Libby Medical Program To Everyone
- Health care resource phone line (HNA) for Libby health plan members
- Interface between HNA and EPA to set up epidemiological data base and study
- Close collaboration with St. Johns Hospital and Physicians